

## Attachment Cover Sheet

Form 471 Application #.....471092  
Form 470 Application #.....264880000114334  
State Master Contract #.....30365-1  
Entity #.....128693  
Applicant's Form Identifier:.....YR8TELECOM

Contact Person:.....Terri Burnham  
Phone Number:.....228-865-4671

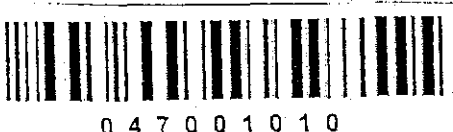
Service Description:.....Centrex Local Telephone Service  
Service Provider:.....Bell South  
SPIN:.....143004824

### Contract Status

- ☐ Tariff or monthly. No contract needed.  
☐ Contract signed after Allowable Contract Date  
☒ State Master Contract selected after Allowable Contract Date

### Documentation Included with Attachment

- ☒ Attachment Cover Sheet **Centrex Attachment #1**  
☒ Form 471 Pre-Discount Cost Calculation Optional Grid **Centrex Attachment #2**  
☒ Centrex Description of Services **Centrex Attachment #3**  
☒ Sample Bill Summary, October 11, 2004 **Centrex Attachment #4**  
☒ Sample Bill Summary, November 11, 2004 **Centrex Attachment #5**  
☒ Sample Bill Summary, December 11, 2004 **Centrex Attachment #6**



**Centrex Attachment #1**

Attachment 3, Page 10

Certification & Item 21  
Attachments mailed to SLD

Page 1 of 1 (Total Grid Pages)

Please read instructions before completing

(To be completed by Schools, Libraries, or Consortia)

[illegible]

Insert this into your Form 471 application to support Block 5, Items 15 & 16 Columns 8-10 and Item 17.

SLC/grid/12/15/2004

## Centrex Attachment #2



7 0 0 1 0 1 0

**Certification & Item 21**  
**Attachments mailed to SLD**

# GULFPORT SCHOOL DISTRICT

Form 471 Application #.....471092

Form 470 Application #.....264880000114334

Entity #.....128693

Centrex / POTS Services SPIN – 143004824 / Bell South Telecommunications, Inc.

1	2	3		4
DESCRIPTION OF LOCAL TELEPHONE SERVICES	AVERAGE ELIGIBLE MONTHLY CHARGES	AVERAGE INELIGIBLE MONTHLY CHARGES		TOTAL AVERAGE ELIGIBLE MONTHLY CHARGES (Column 2 minus 3A, 3B)
		A	B	
<b>BellSouth Centrex Service</b>  Includes: <ul style="list-style-type: none"> <li>• Basic Class of Service</li> <li>• Station Links (117)</li> <li>• Standard Features</li> <li>• Prescribed Interexchange Carrier Charge</li> <li>• Local Number Portability</li> <li>• Centrex NARS (16)</li> <li>• Telecommunications Relay Service</li> <li>• End User Common Line Equivalent Surcharge</li> <li>• Memory Call Answering Service</li> </ul>	<b>\$8,387.54</b>	(-\$140.57)  (Additional listings; alarm circuits)	(-\$170.40)  (GED/Adult Ed.)	<b>\$8,076.57</b>

For Billing Periods:

October 11, 2004      \$ 8,312.73

November 11, 2004    \$ 8,454.53

December 11, 2004    \$ 8,395.38

\$ 25,162.64

\$25,162.64 / 3 = \$8,387.54 average monthly



7 0 0 1 0 1 0

Centrex Attachment #3



BILLING NUMBER 228 865-4600 600  
BILLING PERIOD OCT 11, 2004 00049

**CLUB Service**

SUMMARY OF CHARGES BILLED

BELLSOUTH TELECOMMUNICATIONS, INC. (BST)

TOTAL AMOUNT OF LAST BILL	17,072.17	
PAYMENTS APPLIED THROUGH OCT 12	17,307.29 <sub>R</sub>	
ADJUSTMENTS APPLIED THROUGH OCT 12	0.00	
CREDIT BALANCE (THANK YOU FOR YOUR PAYMENT)		235.12 <sub>R</sub>

CURRENT CHARGES		
BELLSOUTH	8,312.73	
MCI WORLDCOM	8.42	
INTEGRETEL	6.24	} Not included
USBI	2.07	
TOTAL CURRENT CHARGES		8,329.46

TOTAL AMOUNT DUE BY NOV 10.	8,094.34
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HANK YOU FOR CHOOSING BELLSOUTH. WE SINCERELY APPRECIATE YOUR BUSINESS.



0 4 7 0 0 1 0 1 0

Centrex Attachment #4

Attachment 3, Page 13

Certification & Item 21  
Attachments mailed to SLD



BILLING NUMBER 228 865-4600 600  
BILLING PERIOD NOV 11, 2004 00053

**CLUB Service**

SUMMARY OF CHARGES BILLED

BELLSOUTH TELECOMMUNICATIONS, INC. (BST)

TOTAL AMOUNT OF LAST BILL	8,094.34	
PAYMENTS APPLIED THROUGH NOV 11	8,329.46 <del>R</del>	
ADJUSTMENTS APPLIED THROUGH NOV 11	0.00	
CREDIT BALANCE (THANK YOU FOR YOUR PAYMENT)		235.12 <del>R</del>

CURRENT CHARGES		
BELLSOUTH	8,454.53	
MCI WORLDCOM	9.36	
MCI	7.90	
AT&T	2.47	} Not included
INTEGRETEL	6.24	
USBI	1.68	
CORRECTIONAL BILLING SERVICES	217.01	
TOTAL CURRENT CHARGES		8,699.19

TOTAL AMOUNT DUE BY DEC 11	8,464.07
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HANK YOU FOR CHOOSING BELLSOUTH. WE SINCERELY APPRECIATE YOUR BUSINESS.



0 4 7 0 0 1 0 1 0

Centrex Attachment #5

Attachment 3, Page 14

Certification & Item 21  
Attachments mailed to SLD



BILLING NUMBER 228 865-4600 600  
BILLING PERIOD DEC 11, 2004 00056

**CLUB Service**

SUMMARY OF CHARGES BILLED

BELLSOUTH TELECOMMUNICATIONS, INC. (BST)

TOTAL AMOUNT OF LAST BILL	8,464.07	
PAYMENTS APPLIED THROUGH DEC 13	8,464.07	
ADJUSTMENTS APPLIED THROUGH DEC 13	0.00	
ZERO BALANCE (THANK YOU FOR YOUR PAYMENT)		0.00

CURRENT CHARGES		
BELLSOUTH	8,395.38	
MCI WORLDCOM	9.36	
INTEGRETEL	6.24	
USBI	2.02	
CORRECTIONAL BILLING SERVICES	6.15	
TOTAL CURRENT CHARGES		8,419.15

*Not included*

TOTAL AMOUNT DUE BY JAN 10	8,419.15
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THANK YOU FOR CHOOSING BELLSOUTH. WE SINCERELY APPRECIATE YOUR BUSINESS.



047001010

Centrex Attachment #6

Attachment 3, Page 15

Certification & Item 21  
Attachments mailed to SLD

# February 2005

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 9:00 – Asst. Principal's Staff Dev – Terri 10:00 Terri w/ Dianne Walker.	2	3 Penny – Taking Comp day from 1/22  9:00 - Terri – Meeting Certified Personnel/CO Conference Room	4 1:15 – Hope/Dr. Frigo Penny – Taking Comp day from 1/29	5
6	7 Gavin – Sick Leave	8 E-Rate info. to Dianne Swennumson for Board Mtg. Fred - Off	9	10 Take name off AASA hotel wait list.	11 <b>E2T2 DUE TO MDE</b>	12
13	14 8:30 Leadership Team 9:30 Dianne Walker E2T2  4:15 National Board Reception  5:00 Board Meeting	15	16	17 10:00 – Karen McManus	18 Hope – Sick Clint - Vacation ▪ Email to Coach Taylor (donated specs.) ▪ Checked out Vid. Proj. to Jennifer Moak (SPED) ▪ Transferred Panasonic VP to BVMS	19
20	21 Terri – personal 1.5 ▪ D.W. to meet w/ Principals--Perf. Series  Hope – Sick Clint - Vacation	22 Terri – vacation .5 Rick - Sick	23 8:30 – 3:30 – Math Assessment Mtg (K-8)- TSS Lab	24 8:30 – 3:30 – Science Assessment Mtg (K-8)- TSS Lab	25 Reminder – reschedule appt w/Dr. Breazeale	26
	28 Rick – Active Directory Training - NC					

# GULFPORT SCHOOL DISTRICT

Personnel Department  
2010 15th Street  
Gulfport, MS 39501  
**LEAVE REQUEST FORM**

**INSTRUCTIONS:** Please complete this form and send it to the **PERSONNEL DEPARTMENT**.  
Explanations of "Type of Leave" are on the reverse side of this form. Please retain one copy for your files.

Name of Employee: Jessie P Hope Redmond Date: 02/23/2005

School or Department: Technology Support Services

Check One:

- ☐ Administrative Personnel  
☐ Instructional Personnel  
☒ Classified Personnel

First Date Off Job	Last Date Off Job	Total Time Off Job (Days, Mos., Yr.)
02/18/05	02/21/05	2 Days

Type of Leave: Check One. See explanation of Leave on reverse side.

- |  |  |
|--|--|
| <input type="checkbox"/> Vacation  | <input type="checkbox"/> Military                  |
| <input checked="" type="checkbox"/> * Sick <i>(2/18)</i>                   | <input type="checkbox"/> *Temporary Duty           |
| <input type="checkbox"/> Personal Leave with pay                           | <input type="checkbox"/> *Professional             |
| <input checked="" type="checkbox"/> Personal Leave without pay <i>2/21</i> | <input type="checkbox"/> *Pre-School Professional  |
| <input type="checkbox"/> * Jury/Legal Duty                                 | <input type="checkbox"/> *Post-School Professional |
| <input type="checkbox"/> Maternity/Paternity                               | <input type="checkbox"/> *Emergency Leave          |
| <input type="checkbox"/> Workers' Compensation                             |  |

\*Additional Explanation is needed.

Flv

**\*\* LEAVE REQUESTED**

☒ With Pay

☐ Without Pay

Signature of Employee ⇒

*Jessie P (Hope) Redmond*

Supervisor's Signature of Approval ⇒

*Terri Burnham*

Associate Superintendent for Personnel ⇒

Approved by Personnel Department:

☐ With Pay

☐ Without Pay

**Attachment 5a**

**\*\*ANY LEAVE REQUESTED OR APPROVED IS CONTINGENT UPON THE TYPE OF LEAVE BEING REQUESTED.**

*Employee Leave Form*

Employee shall receive a copy of this form after processing.



# GULFPORT SCHOOL DISTRICT

Personnel Department  
2010 15th Street  
Gulfport, MS 39501  
**LEAVE REQUEST FORM**

**INSTRUCTIONS:** Please complete this form and send it to the **PERSONNEL DEPARTMENT**.  
Explanations of "Type of Leave" are on the reverse side of this form. Please retain one copy for your files.

Name of Employee: Clint Lowry			Date: 02/11/05
School or Department: Technology Support Services			Check One: <input type="checkbox"/> Administrative Personnel <input type="checkbox"/> Instructional Personnel <input checked="" type="checkbox"/> Classified Personnel
First Date Off Job  02/18/05	Last Date Off Job  02/21/05	Total Time Off Job (Days, Mos., Yr.)  2 Days	

Type of Leave: Check One. See explanation of Leave on reverse side.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Vacation        | <input type="checkbox"/> Military                  |
| <input type="checkbox"/> * Sick                     | <input type="checkbox"/> *Temporary Duty           |
| <input type="checkbox"/> Personal Leave with pay    | <input type="checkbox"/> *Professional             |
| <input type="checkbox"/> Personal Leave without pay | <input type="checkbox"/> *Pre-School Professional  |
| <input type="checkbox"/> * Jury/Legal Duty          | <input type="checkbox"/> *Post-School Professional |
| <input type="checkbox"/> Maternity/Paternity        | <input type="checkbox"/> *Emergency Leave          |
| <input type="checkbox"/> Workers' Compensation      |  |

\*Additional Explanation is needed.

\*\* LEAVE REQUESTED ☒ With Pay ☐ Without Pay

Signature of Employee ⇒

*Clint Lowry*

Supervisor's Signature of Approval ⇒

*Terri Burnham*

Associate Superintendent for Personnel ⇒

Approved by Personnel Department:

*Jay*

☒ With Pay

☐

Attachment 5b

**\*\*ANY LEAVE REQUESTED OR APPROVED IS CONTINGENT UPON THE TYPE OF LEAVE BEING REQUESTED. Employee Leave Form**

Employee shall receive a copy of this form after processing.

## PATIENT DISCHARGE INSTRUCTION SHEET

The following information is provided to you to promote the continuity of your health care after discharge

ADDRESSOGRAPH

EDUCATIONAL MATERIALS/CLASSES

2-11		SIGNIFICANT OTHER(S) INVOLVED IN INSTRUCTION	grand daughter
------	--	--	----------------

PATIENT/SIGNIFICANT OTHER(S) VERBALIZES KNOWLEDGE OF:

2-11		ACTIVITY RESTRICTIONS	as tolerated
2-11		DIET RESTRICTIONS	as tolerated
2-11		TREATMENTS	

		SUPPLIES/EQUIPMENT	
--	--	--------------------	--

		PHONE NUMBER(S)	
		PRESCRIPTIONS RECEIVED	called in to Ross Rd Wina Dixie

REFER TO MEDICATION DISCHARGE INSTRUCTION SHEETS ☐ MEDICATION(S) FROM HOME RETURNED ☐FOOD & DRUG INTERACTION PAMPHLET GIVEN TO PATIENT ☐

MEDICATION YOU WILL CONTINUE TO TAKE AT HOME AND THE NUMBER OF DOSES TAKEN TODAY

1.	See d/c drug list	2.	
3.		3.	

2-11		COMMUNITY REFERRAL AGENCIES	
		Keep in Home 388-0070 - ask about home P.T. O.T. home care	
		Med. in wheel	

2-11		FOLLOW-UP APPOINTMENT(S)	
		Dr. Hogenauer - one week 392-5655	
		Dr. Martin 3-4 weeks 392-7429	

PATIENT/SIGNIFICANT OTHER ACKNOWLEDGEMENT OF INSTRUCTIONS

RECEIPT OF VALUABLES, IF ANY ☐

(SIGNATURE) \_\_\_\_\_ (DATE) \_\_\_\_\_

FINAL DISCHARGE NOTE (DATE) \_\_\_\_\_ TIME \_\_\_\_\_

METHOD OF TRANSPORTATION vehicle WITH WHOM \_\_\_\_\_SIGNATURE Martin

INIT. \_\_\_\_\_ SIGNATURE \_\_\_\_\_ INIT. \_\_\_\_\_ SIGNATURE \_\_\_\_\_ INIT. \_\_\_\_\_

Attachment 6

Patient Instruction Discharge Sheet

Thursday, February 17

**A.M.**

- ☐ ☒ Change Nitroglycerin patch.
- ☐ ☒ Advair Inhaler (1 puff)
- ☐ ☒ Albuterol Inhaler (Shake - 2 puffs)
- ☐ ☒ Carafate (Shake - 2 tsp. in cup)
- ☐ ☒ Pills:

1. Protinex (Stomach Acid)
2. Baby Aspirin (Blood Thinner)
3. Benzonatate (Cough)
4. Betapace/Sotalol - 160 mg. (Heart)
5. Lasix (2) (Diuretic)
6. Potassium Chloride (Leg Cramps)
7. Mucinex (Expectorant)
8. Vasotec - 5 mg. (Blood Pressure)
9. Levaquin - 500 mg. (Antibiotic)

Out of these

**At Lunch**

- ☐ ☒ Take Potassium
- ☐ ☒ Albuterol Inhaler (Shake - 2 puffs)
- ☐ ☒ Carafate (Shake - 2 tsp. in cup)

☒ She's had Lasix already

**P.M.**

- ☐ ☒ Advair Inhaler (1 puff)
  - ☐ ☒ Albuterol Inhaler (Shake - 2 puffs)
  - ☐ ☐ Carafate (Shake - 2 tsp. in cup)
  - ☐ ☒ Pills:
1. Surfak (Stool Softener)
  2. Doxepin (Anxiety)
  3. Vytorin (Cholesterol)
  4. Digoxin (Heart Rate)

Terri  
add  
steroid pack to  
the list  
and  
(Vytorin  
antibiotic  
1 addaf)

**Bedtime**

- ☐ Carafate (2 tsp. in cup)

**As Needed**

- ☐ Darvocet (Pain)
- ☐ Phenergan (Nausea)

Friday, February 18



- ☒ Change Nitroglycerin patch.
- ☒ Advair Inhaler (1 puff)
- ☒ Albuterol Inhaler (Shake - 2 puffs)
- ☒ Carafate (Shake - 2 tsp. in cup)
- ☒ Pills:
- |                               |                  |
|-------------------------------|------------------|
| 1. Protinex                   | (Stomach Acid)   |
| 2. Baby Aspirin               | (Blood Thinner)  |
| 3. Benzonatate                | (Cough)          |
| 4. Betapace/Sotalol - 160 mg. | (Heart)          |
| 5. Lasix                      | (Diuretic)       |
| 6. Potassium Chloride         | (Leg Cramps)     |
| 7. Mucinex                    | (Expectorant)    |
| 8. Vasotec - 5 mg.            | (Blood Pressure) |
| 9. Vytarin                    | (Antibiotic)     |
| 10. Prednisone                |                  |

**At Lunch**

- ☒ Albuterol Inhaler (Shake - 2 puffs)
- ☒ Carafate (Shake - 2 tsp. in cup)
- ☒ Surfak (Stool Softener)
2. Prednisone

**P.M.**

- ☐ Advair Inhaler (1 puff)
- ☐ Albuterol Inhaler (Shake - 2 puffs)
- ☐ Carafate (Shake - 2 tsp. in cup)
- ☐ Pills:
- |               |                  |
|---------------|------------------|
| 1. Surfak     | (Stool Softener) |
| 2. Doxepin    | (Anxiety)        |
| 3. Vytarin    | (Cholesterol)    |
| 4. Digoxin    | (Heart Rate)     |
| 5. Prednisone |                  |

**Bedtime**

- ☐ Carafate (2 tsp. in cup)
- ☐ Pills:
1. Prednisone (2)

**As Needed**

- ☐ Darvocet (Pain)
- ☐ Phenergan (Nausea)

Before the  
Federal Communications Commission  
Washington, D.C. 20554

In the Matter of	)	
	)	
Request for Waiver by	)	
	)	
Woodburn School District	)	File No. SLD-240961
Woodburn, Oregon	)	
	)	
Federal-State Joint Board on Universal Service	)	CC Docket No. 96-45
	)	
Changes to the Board of Directors of the	)	CC Docket No. 97-21
National Exchange Carrier Association, Inc.	)	

**ORDER**

**Adopted: October 3, 2003**

**Released: October 6, 2003**

By the Telecommunications Access Policy Division, Wireline Competition Bureau:

1. Before the Telecommunications Access Policy Division is a Request for Waiver filed by the Woodburn School District (Woodburn).<sup>1</sup> Petitioner seeks waiver of the filing deadline of October 28, 2001 for filing FCC Form 486 in Funding Year 2001 of the schools and libraries universal service support mechanism.<sup>2</sup> For the reasons set forth below, we grant Woodburn's Request for Waiver.

2. Woodburn filed its FCC Form 486 on August 8, 2001, more than two months before the October 28 deadline, but failed to complete the required Block 4 certification.<sup>3</sup> However, SLD did not notify Woodburn of the problem with its form until SLD mailed notice on October 22, 2001, shortly before the October 28, 2001 deadline.<sup>4</sup> Woodburn filed the corrected

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<sup>1</sup> See Letter from Paul A. Goodwin, Woodburn School District, to Federal Communications Commission, filed November 27, 2002 (Request for Waiver).

<sup>2</sup> See Request for Waiver. Section 54.719(c) of the Commission's rules provides that any person aggrieved by an action taken by a division of the Administrator may seek review from the Commission. 47 C.F.R. § 54.719(c). Section 1.3 of the Commission's rules provides that the Commission may waive any provision of its rules if good cause is shown. 47 C.F.R. § 1.3.

<sup>3</sup> See Letter from Schools and Libraries Division, Universal Service Administrative Company, to Jo Anne Wolf, Woodburn School District, dated October 17, 2002 (Administrator's Decision on Appeal).

<sup>4</sup> See Letter from Schools and Libraries Division, Universal Service Administrative Company, to Jo Anne Wolf, Woodburn School District, dated October 22, 2001 (Woodburn Form 486 Return Letter).

FCC Form 486 on November 1, 2001, after the October 28, 2001 deadline.<sup>5</sup> Consequently, it received discounts only for services starting November 1, 2001, rather than July 1, 2001.<sup>6</sup>

3. A rule may be waived where the particular facts make strict compliance inconsistent with the public interest.<sup>7</sup> In addition, the Commission may take into account considerations of hardship, equity, or effective implementation of overall policy on an individual basis.<sup>8</sup> In sum, waiver is appropriate if special circumstances warrant a deviation from the general rule, and such deviation would better serve the public interest than strict adherence to the general rule.<sup>9</sup>

4. Consistent with our precedent in the *Eastern Lebanon Order*, we conclude that Woodburn's request for discounts on telecommunications services presents special circumstances warranting a waiver of our rules.<sup>10</sup> As was the case in the *Eastern Lebanon Order*, Woodburn made a good faith effort to comply with the deadline by filing its original FCC Form 486 early in the funding year and by filing the corrected version shortly after being apprised of the mistake.<sup>11</sup> Moreover, the deadline involved a first-time information request.<sup>12</sup> Woodburn also sought discounts only for telecommunications services, and the Commission has authority to waive the deadline with respect to requests that involve only telecommunications services.<sup>13</sup>

<sup>5</sup> See FCC Form 486, Woodburn School District, filed November 1, 2001.

<sup>6</sup> Under the Children's Internet Protection Act, Funding Year 2001 applicants were required to file their FCC Forms 486 by no later than October 28, 2001 unless their service began after that date or a funding commitment decision letter issued after that date. See 47 U.S.C. §§ 254(h)(5)(E), 254(h)(6)(E); *CIPA Order*, 16 FCC Rcd at 8188-89, 8191, paras. 10, 18. A Funding Year 2001 applicant with a funding commitment decision letter who failed to meet the October 28, 2001 deadline could obtain discounts only for services received on or after the date that its FCC Form 486 was postmarked. See Schools and Libraries Universal Service, Receipt of Service Confirmation Form, OMB 3060-0853 (July 2001) (FCC Form 486); Instructions for Completing the Schools and Libraries Universal Service, Receipt of Service Confirmation Form (FCC Form 486), OMB 3060-0853 (July 2001) at 9 (Form 486 Instructions).

<sup>7</sup> *Northeast Cellular Telephone Co. v. FCC*, 897 F.2d 1164, 1166 (D.C. Cir. 1990) (*Northeast Cellular*).

<sup>8</sup> *WAIT Radio*, 418 F.2d 1027, 1157 (1972) (*WAIT Radio*).

<sup>9</sup> *Northeast Cellular*, 897 F.2d at 1166.

<sup>10</sup> See *Request for Review by Eastern Lebanon County School District, Federal-State Joint Board on Universal Service, Changes to the Board of Directors of the National Exchange Carrier Association, Inc.*, File No. SLD-232946, CC Docket Nos. 96-45 and 97-21, Order, 18 FCC Rcd 5466 (Wireline Comp. Bur. 2003) (*Eastern Lebanon Order*) (granting waiver request for telecommunications services for Funding Year 2001 where SLD unduly delayed notifying applicant of incomplete FCC Form 486).

<sup>11</sup> See *id.*; Request for Waiver.

<sup>12</sup> See *Eastern Lebanon Order*; Request for Waiver.

<sup>13</sup> See *Eastern Lebanon Order*.

5. ACCORDINGLY, IT IS ORDERED, pursuant to authority delegated under sections 0.91, 0.291, 1.3, and 54.722(a) of the Commission's rules, 47 C.F.R. §§ 0.91, 0.291, 1.3, and 54.722(a), that the Request for Waiver filed by Woodburn School District, Woodburn, Oregon on November 27, 2002 IS GRANTED and REMANDED TO SLD to the extent provided herein.

FEDERAL COMMUNICATIONS COMMISSION


Mark G. Seifert  
Deputy Chief, Telecommunications Access Policy Division  
Wireline Competition Bureau

## GULFPORT SCHOOL DISTRICT

November 2, 2005

### MEMORANDUM

**TO:** Superintendent  
Board of Trustees

**FROM:** George Triggs 

**RE:** Monthly Finance Reports -- Board Agenda 11/7/05

Expenditures exceeded revenues by \$908,579 and \$422,784 in the General Funds Group respectively for the months of August and September 2005, as shown on page 4.

One-half of the Title I monies are available for drawdown however, SPED monies are **not** yet available for us to request from the state. With one quarter of our year complete we spent 16.9% of our District Maintenance fund budget and received 16.7% in revenues.

The large negative balances in Textbooks and Vocational Educational funds will become positive in February, when we plan to transfer operating monies from the general fund. Remember also that in October we received \$2.9 million in advances from insurance that covered the large deficit in Fund #3022.

At the last board meeting we talked about cash flow being a potential problem around March 2006, depending on property tax collections. We estimated about a \$4 million shortage. Monday, November 7<sup>th</sup>, I will talk to a FEMA Community Disaster Loan representative, about how that program could assist us with a low interest deferred payment loan.

Attachment 9

Letter to Board